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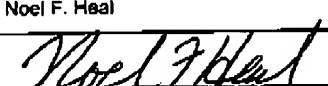
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/516,800	
	Filing Date	March 1, 2000	
	First Named Inventor	Thomas J. Kolze	
	Art Unit	2631	
	Examiner Name	Emmanuel Bayard	
Total Number of Pages in This Submission	16	Attorney Docket Number	12-1038C

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Date	September 9, 2004	

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 12-1038C	
Applicant(s): Thomas J. Kolze et al.					
Application No. 09/516,800	Filing Date March 1, 2000	Examiner Emmanuel Bayard	Customer No.	Group Art Unit 2631	Confirmation No. 2502
Invention: ASYNCHRONOUS REAMPLING FOR DATA TRANSPORT					
COMMISSIONER FOR PATENTS:					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	30 -	30 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	3 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 14-1325 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.</div><div>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</div></div>					
<div style="text-align: center;"> Signature</div> <div>Noel F. Heal, Reg. No. 26,074 Northrop Grumman Space Technology One Space Park, E1/2041 Redondo Beach, CA 90278 Telephone: (310) 812-4910 FAX: (310) 812-2687</div>			Dated: September 9, 2004		
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